

02/12/02

J1058 U.S. PTO

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

USP1694A-DS2

First Inventor

Nicoletta M. Smith

Title

Gum Disposal Pocket

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 17]
(preferred arrangement set forth below)
- Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 03]
5. Oath or Declaration [Total Pages 01]
- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
- i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of
(when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure ☐ Copies of IDS
Statement (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: _____ / _____

Prior application information:

Examiner: _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or



Correspondence address below

Name

RAYMOND Y. CHAN

Address

1050 OAKDALE LANE

City

ARCADIA

State

CA

Zip Code

91006

Country

U.S.A.

Telephone

(626)571-9812

Fax

(626)571-9813

Name (Print/Type)

RAYMOND Y. CHAN

Registration No. (Attorney/Agent)

37,484

Signature



Date

01/23/2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

In the United States Patent and Trademark Office

Commissioner of Patents and Trademarks
Washington, District of Columbia 20231

Mailed: January 23, 2002
Attorney Docket: USP1694A-DS2

Sir:

Please file the following enclosed patent application papers:

Applicant #1, Name: Nicoletta M. Smith

Applicant #2, Name: _____

Title: Gum Disposal Pocket

☒ Specification, Claims, and Abstract: Nr. Of Sheets 17

☒ Declaration: Date Signed: Jan-21-2002

☒ Drawing(s): Nr. Of Sheets Enc.: (In Triplicate): Formal: 03 Informal: _____

☒ The applicant claims small entity status. See 37 CFR 1.27

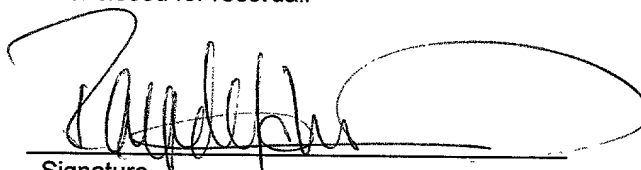
☐ Assignment; please record and return; recordal fee enclosed.

☒ Check for \$ 370.00 for:

☒ \$ 370.00 for filing fee (not more than three independent claims and twenty total claims are presented).

☐ \$ _____ Additional of Assignment is enclosed for recordal.

Very respectfully,



Signature
Raymond Y. C. Chan
Reg. Nr. : 37,484

1050 Oakdale Lane,
Arcadia, CA 91006

Certificate of Mailing

I hereby certify that this paper or fee is being deposited with the United States Postal Service using "First Class Mail Post Office To Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to "Commissioner of Patents and Trademarks, Washington, DC 20231"

Signature:  Date: 01/23/2002

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 370.00**Complete if Known**

Application Number	
Filing Date	
First Named Inventor	Nicoletta M. Smith
Examiner Name	
Group Art Unit	
Attorney Docket No.	USP1694A-DS2

METHOD OF PAYMENT

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
NumberDeposit
Account
Name☐ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17☒ Applicant claims small entity status.
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money
Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Fee Fee Fee
Code (\$) Code (\$)

Fee Code	Large Entity (\$)	Small Entity Code	Small Entity (\$)	Fee Description
101	740	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee

Fee Paid

SUBTOTAL (1) (\$) 370.00**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Small Entity

Fee Fee Fee Fee
Code (\$) Code (\$)

Fee Code	Large Entity (\$)	Small Entity Code	Small Entity (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Fee Code	Large Entity (\$)	Small Entity Code	Small Entity (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0.00**SUBMITTED BY**

Name (Print/Type)

RAYMOND Y. CHAN

Registration No.
(Attorney/Agent)

37,484

Complete (if applicable)

Telephone

(626)571-9812

Signature

Date

01/23/2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

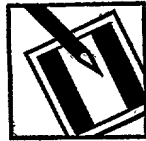
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

...UP CALL 1-800-222-1811

**PRIORITY
MAIL**

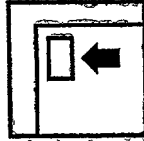
UNITED STATES POSTAL SERVICE®

HOW TO USE:



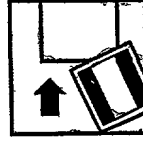
1. COMPLETE ADDRESS LABEL AREA

Type or print required return address and addressee information in customer block (white area) or on label (if provided).



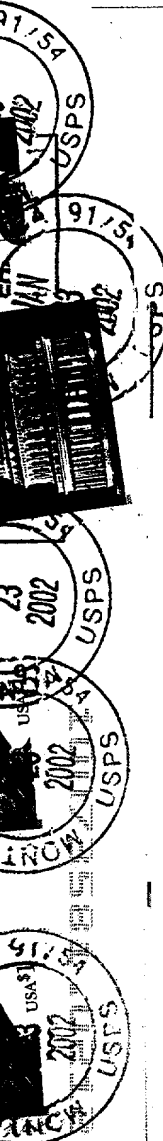
2. PAYMENT METHOD

Affix postage or meter strip to area indicated in upper right hand corner.



3. ATTACH LABEL (if provided)

Remove label backing and adhere over customer address block area (white area).



7001 0320 0001 1590 7712

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL



7001 0320 0001 1590 7712

www.usps.com



UNITED STATES POSTAL SERVICE™

www.usps.gov

From **USPTO & RAYMOND
PATENT CENTER**
108 N YNEZ AVE
MONTEREY PARK
STE 128
CA 91754-1680

76/ 200

J1040 U.S. PTO
10/073581



02/12/02

TO: BOX NEW APPLICATION
COMMISSIONER OF PATENTS
AND TRADEMARKS
WASHINGTON DC 20231-0001

Label 228C August 1997